Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000 Effective October 1, 2000

CLAIMS AS FILED - PART I (Column 1)					(Colur	nn 2)		SMALL ENTITY TYPE			OTHER SMALL I	
TOTAL CLAIMS			26				F	RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		ВА	SIC FEE	355.00	OR	BASIC FEE	710.00
то	TAL CHARGEAE	BLE CLAIMS	⇒ minus 20=		. 6		;	X\$ 9=	-	OR	X\$18=	108
IND	EPENDENT CL	AIMS	7 minus 3 =		· 4			X40=		OR	X80=	:320
MULTIPLE DEPENDENT CLAIM PRESENT								-135=	-	OR	+270=	0_0_
* If the difference in column 1 is less than zero, enter					r "0" in c	olumn 2	L.	OTAL		OR	TOTAL	1138
CLAIMS AS AMENDED - PART											OTHER	THAN
		(Column 1)		(Colu		2) (Oolulliii O)			ENTITY	OR	SMALL	
AMENDMENT A	Page of the Control o	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI PAID	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	T CL AIM	=		X40=		OR	X80=	
-	FIRST PRESE	NTATION OF M	OLTIPLE DEI	PENDEN	CLAIM		•	-135=		OR	+270=	٠
_										OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu	mn 2)	(Column 3)		DIT. FEE		•		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUN PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	T OL ALIA	=		X40=	······································	OR	X80=	
<u> </u>	FIRST PRESE	CLAIM		] [	-135=		OR	+270=				
										ΩD	TOTAL ADDIT. FEE	
		(Column 1)			ımn 2)	(Column 3)		DIT. FEE			ADDIT: 1 EE	
AMENDMENT C	देशकी कार्य ये देशकील हो। देशक	CLAIMS REMAINING AFTER AMENDMENT		NUM PREV	HEST MBER IOUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**	-4	=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	<del>-</del>	=		X40=		OR	X80=	
F	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							-135=		OR	+270=	-
<ul> <li>If the entry in column 1 is less than the entry in column 2, write "0" in column 3.</li> <li>If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."</li> </ul>							L	TOTAL			TOTAL	
	*If the "Highest Nu	imber Previously f imber Previously I nber Previously P	Paid For" IN TH	IIS SPACE	is less that	an 3, enter "3."	,,,	DIT. FEE	propriate bo		ADDIT. FEE	

## BEST AVAILARIE CODY PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

CLAIMS AS FILED - PART I (Column 1)					Column 2) SMALL ENTITY TYPE TYPE			ITITY	OR	OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS						RATE	FEE		RATE	FEE	
FOR	NUMBER FILED		NUMBER EXTRA			BASIC FEE	370.00	OR	BASIC FEE	740.00	
TOTAL CHARGEABLE C	t - minus 20=		* 4			X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS		minus 3 =		*			X42=		OR	X84=	
MULTIPLE DEPENDENT CLAIM PRESENT							+140=		OR	+280=	
* If the difference in column 1 is less than zero, enter					olumn 2		TOTAL		OR	TOTAL	
CLAIN (Co	mn 2)	(Column 3)		SMALL	ENTITY	OR	OTHER SMALL I				
REM	LAIMS MAINING NFTER NDMENT		PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA	-	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Total * C	21	Minus	** 0	26	=		X\$, <b>9</b> =	en jar a	OR	X\$18=	<b>#</b> -7
Independent FIRST PRESENTAT	CONTO M	Minus	ENDEN	TCLAIM	=		X42=		OF	X84=	
FIRST PRESENTAL	ON OF MC	ILIPLE DEP	ENDEN	CLAIM		1	+140=	- 1.	OR	+280=	
			٠-			'	TOTAL ADDIT. FEE	.j. 5°.	OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)											
CO RE	CLAIMS MAINING AFTER ENDMENT		NUN PREV	HEST MBER IOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Total *	17	Minus	** 2	14	=		X\$ 9=		OR	X\$18=	
Total *  Independent *	4	Minus	***	7	=/	1	X42=		OR	X84=	
FIRST PRESENTAT	ION OF MI	JUITPLE DEP	ENDEN	IT CLAIM		J	+140=		OR	+280=	
							TOTAL ADDIT. FEE		OR	TOTAL ADDIT, FEE	
(C	olumn 1)		(Colu	ımn 2)	(Column 3		, <del>, , , , , , , , , , , , , , , , , , </del>		Ter 		3
O RE	CLAIMS MAINING AFTER ENDMENT		NUI PREV	HEST MBER 10USLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Total * (	99	Minus	** (	36	=		X\$ 9=		OR	X\$18=	
Independent *	6	Minus	***	7	<u> </u>		X42=		OR	X84=	
FIRST PRESENTAT	TON OF M	ULTIPLE DEI	PENDEN	NT CLAIM		L	+140=	*	OR	+280=	99928181
- * If the entry in column 1 i	s less than t	he entry in colu	ımn 2, wri	ite "0" in co	lumn 3.	٥.	TOTAL		OR	TOTAL	
** If the "Highest Number *** If the "Highest Number	E is less tha	an 3. enter "3."	•	ADDIT. FEE			ADDIT. FEE				
The "Highest Number P	reviously Pa	ud For" (Total o	rind pen	ndent) is th	nignest numi	DEL 10	யாவரான அற	hu huste po	x in co	AUITUI I.	

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